

County: Juneau  
 FAIR VIEW HOME  
 1050 DIVISION ST

Facility ID: 4130

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MAUSTON 53948 Phone:(608) 847-6161  
 Operated from 1/1 To 12/31 Days of Operation: 366  
 Operate in Conjunction with Hospital? Yes  
 Number of Beds Set Up and Staffed (12/31/04): 60  
 Total Licensed Bed Capacity (12/31/04): 60  
 Number of Residents on 12/31/04: 60

Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? Yes  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 60

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		33.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		46.7
Supp. Home Care-Household Services	No	Developmental Disabilities	1.7	Under 65	5.0	More Than 4 Years		20.0
Day Services	No	Mental Illness (Org./Psy)	23.3	65 - 74	13.3			-----
Respite Care	No	Mental Illness (Other)	5.0	75 - 84	31.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	3.3		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	10.0	65 & Over	95.0	-----		
Transportation	No	Cerebrovascular	18.3		-----	RNs		18.7
Referral Service	No	Diabetes	3.3	Gender	%	LPNs		6.0
Other Services	No	Respiratory	5.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	26.7	Male	21.7	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	78.3			51.0
Provide Day Programming for			100.0		-----	-----		
Developmentally Disabled	Yes				100.0	-----		

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	1	2.2	141	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7	
Skilled Care	1	100.0	339	44	95.7	122	0	0.0	0	13	100.0	165	0	0.0	0	0	0.0	0	58	96.7	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	1	2.2	181	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	1	100.0		46	100.0		0	0.0		13	100.0		0	0.0		0	0.0		60	100.0	

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	3.8	Bathing	0.0	68.3	31.7	60
Private Home/With Home Health	0.0	Dressing	0.0	86.7	13.3	60
Other Nursing Homes	15.1	Transferring	10.0	70.0	20.0	60
Acute Care Hospitals	81.1	Toilet Use	3.3	66.7	30.0	60
Psych. Hosp.-MR/DD Facilities	0.0	Eating	40.0	53.3	6.7	60
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0					
Total Number of Admissions	53	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care	15.0	
Private Home/No Home Health	32.7	Occ/Freq. Incontinent of Bladder	71.7	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	17.3	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning	0.0	
Other Nursing Homes	1.9			Receiving Ostomy Care	3.3	
Acute Care Hospitals	9.6	Mobility		Receiving Tube Feeding	3.3	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.0	Receiving Mechanically Altered Diets	36.7	
Rehabilitation Hospitals	0.0					
Other Locations	1.9	Skin Care		Other Resident Characteristics		
Deaths	36.5	With Pressure Sores	1.7	Have Advance Directives	70.0	
Total Number of Discharges		With Rashes	1.7	Medications		
(Including Deaths)	52			Receiving Psychoactive Drugs	41.7	

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Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					
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	This Facility	Other Hospital-Based Facilities	All Facilities		
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	100.0	91.7	1.09	88.8	1.13
Current Residents from In-County	83.3	85.3	0.98	77.4	1.08
Admissions from In-County, Still Residing	30.2	14.1	2.15	19.4	1.56
Admissions/Average Daily Census	88.3	213.7	0.41	146.5	0.60
Discharges/Average Daily Census	86.7	214.9	0.40	148.0	0.59
Discharges To Private Residence/Average Daily Census	43.3	119.8	0.36	66.9	0.65
Residents Receiving Skilled Care	98.3	96.2	1.02	89.9	1.09
Residents Aged 65 and Older	95.0	90.7	1.05	87.9	1.08
Title 19 (Medicaid) Funded Residents	76.7	66.8	1.15	66.1	1.16
Private Pay Funded Residents	21.7	22.6	0.96	20.6	1.05
Developmentally Disabled Residents	1.7	1.4	1.22	6.0	0.28
Mentally Ill Residents	28.3	32.7	0.87	33.6	0.84
General Medical Service Residents	26.7	22.0	1.21	21.1	1.27
Impaired ADL (Mean)*	55.0	49.1	1.12	49.4	1.11
Psychological Problems	41.7	53.5	0.78	57.7	0.72
Nursing Care Required (Mean)*	7.7	7.4	1.04	7.4	1.04